



# PROPOSED PROJECT BUDGET

## Description

## Dollars

### **COSTS:\***

- |  |              |           |
|--|--------------|-----------|
| 1. New Construction Costs ***                                      | _____        |           |
| 2. Renovation Costs ***  | _____        |           |
| <b>3. Subtotal Construction Costs (#1 plus #2)</b>                 | <b>_____</b> |           |
| 4. Architectural/Engineering Fees                                  | _____        |           |
| 5. Other Equipment (not in construction contract)                  | _____        |           |
| 6. Major Medical Equipment   | _____        |           |
| 7. Land Acquisition Costs ***                                      | _____        |           |
| 8. Consultants' Fees/Legal Fees ***                                | _____        |           |
| 9. Interest During Construction (net of interest earned) ***       | _____        |           |
| 10. Other Costs ****   | _____        |           |
| <b>11. Subtotal Non-Construction Costs (sum of #4 through #10)</b> | <b>_____</b> |           |
| <b>12. Total Project Development Costs (#3 plus #11)</b>           | <b>_____</b> | <b>**</b> |

### **FINANCING:**

- |   |              |           |
|---|--------------|-----------|
| 13. Unrestricted Funds                                      | _____        |           |
| 14. Bonds   | _____        |           |
| 15. Loans   | _____        |           |
| 16. Other Methods (specify)                                 | _____        |           |
| <b>17. Total Project Financing (sum of #13 through #16)</b> | <b>_____</b> | <b>**</b> |

- |  |       |
|--|-------|
| 18. New Construction Total Square Footage        | _____ |
| 19. New Construction Costs Per Square Foot ***** | _____ |
| 20. Renovated Space Total Square Footage         | _____ |
| 21. Renovated Space Costs Per Square Foot *****  | _____ |

\* Attach additional page(s) to provide details of how each line item was determined, including all methods and assumptions used.

\*\* These amounts should be the same.

\*\*\* Capitalizable items to be recognized as capital expenditures after project completion.

\*\*\*\* Include as Other Costs the following: other costs of financing; the value of existing lands, buildings and equipment not previously used for health care services, such as a renovated house converted to residential care, determined by original cost, fair market value, or appraised value; or the fair market value of any leased equipment or building, or the cost of beds to be purchased.

\*\*\*\*\* Divide new construction costs by total new construction square footage.

\*\*\*\*\* Divide renovation costs by total renovation square footage.